

Perioperative Care

Preoperative and Postoperative Care

■ Definition of Terms

- Adaptation
- Anesthesia
- Anesthesiology
- Anesthesiologist
- Analgesia
- Analgesic



Definition of Terms

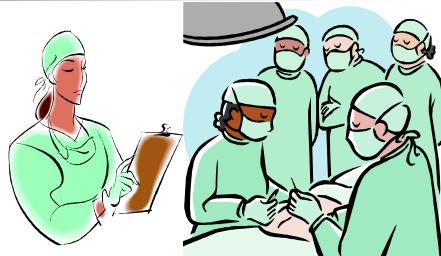
- Anxiety
- Atelectasis
- Arthrogram
- Arthroscopy
- Bronchitis
- Bronchoscopy
- Contamination
- Dehydration
- Dehiscence





Definition of Terms

- Euphoria
- Exudate
- Elective Surgery
- Emboli
- Evisceration
- Hypothermia
- Hernia
- Hypnotic



Definition of Terms

- Hypoxia
- Perioperative
- Pneumonia
- Postoperative
- Preoperative
- Splinting
- Suture
- Thrombophlebitis
- Venous access lock





Definition of Terms

- Hypothermia
- Hypovolemia
- Induction
- Laparoscopy
- MRI (Magnetic Resonance Imaging)
- Mesentery
- Narcotic
- Neurohormonal



Definition of Terms

- Orthopedic
- Peritonitis
- Trauma
- Vasoconstriction





Surgery

- Performed to client when the best treatment for his disorder is:
- Repairing
- Removing
- Replacing body tissues or organs
- Is an invasive procedure/process because an incision is made into the body or part is removed



Perioperative

Three Phases:

Preoperative, Intraoperative, and Postoperative

Factors in Surgery

- Extensive or high risk surgery are conducted in an acute care facility (hospital).
- Less complex or less dangerous are performed in walk-in or ambulatory center. Often called a surgi-center or same-day surgery.
- Ex: physician's clinic, dept in hosp. , free standing facility.
- See Rosdahl pp. 745 Table 56-1



Type of Surgery

- Optional/Elective
- Required/Nonelective
- Urgent/Nonelective
- Emergency



Anesthesia

- Anesthesia – complete or partial loss of sensation
- Anesthetics- medication that induces anesthesia
- Anesthesiology – discipline of medicine that administers anesthetics.
- Anesthesiologist – a physician trained in anesthesiology.
- Nurse anesthetist – RN trained in anesthesiology



Anesthesia

Types: 2 main classes:

- General anesthetics
- Local, regional or spinal anesthetics



Anesthesia

- General Anesthetics
 - Administered via IV, rectally or by inhalation
 - commonly given in chest or abdominal surgery or in some orthopedic and genitourinary procedures
- * The less the anesthetic used, the safer it is for the client.



Anesthesia

General Anesthesia

Inhalation – halothane (Fluothane)

- nitrous oxide
- cyclopane

IV injection – barbiturate

- thiopental sodium (Pentothal)
- etomidate (amidate)
- fentanyl citrate with droperidol
- ketamine hydrochloride
- propofol (diprivan).

The client fall asleep, after which she is intubated, and maintained on an inhalation anesthetic



Anesthesia

■ Local Anesthesia

- local anesthetic is injected or administered topically.
- Procedures performed under local anesthesia: dental work, many types of plastic surgery, skin suturing, and some type of eye surgery.

* Much brain surgery are done using local anesthesia.



Conscious Sedation

- Intravenous sedative medications are used alone or in conjunction with local anesthetics.
- Has a depressed level of consciousness but continues to breathe and is able to respond to verbal stimuli. Midazolam HCl (Versed). Induce sleepiness and reduces anxiety.



Nursing Care for Client Who is Receiving Anesthesia

- Check for allergies
- Abnormal Lab. Results
- Extreme apprehension post induction
- Keep client flat until worn off
- Monitor urine output
- Observe sign of resp. distress



Nursing Care for Client Who is Receiving Anesthesia

- Watch for sign of circulatory depression
- Careful use of neuromuscular blockers
- Keep Narcan or naloxone at an easy access
- Watch skin irritation with use of topical anesthetics
- Anticipate need for pain medication early after recovery from anesthesia



Preoperative Nursing Care

- Surgeon or anesthesiologist writes orders indicating exactly what medications and necessary physical preparations the client needs.
- Carry out preoperative orders exactly as ordered. They affect the surgery success.
- Remember to provide emotional support.



Preoperative Nursing Care

- Preoperative Checklist
 - each facility has a preoperative checklist to use in the care of all clients requiring surgery. Checklist identifies assessments, medications, & other physical preparations that must be completed before the client is anesthetized.



Preoperative Nursing Care

- Be sure the client has signed the operative consent (permit) before giving any pre-sedation medications. Otherwise the client cannot be held responsible for signing the permit after receiving the medication. In event client can not sign a next of kin must then be called for permission to operate. If not available or located. The surgery needs to be postponed or rescheduled.



Preoperative Nursing Care

- Assessments – Observation
 - PE & Lab tests.
- Skin Preparation
- Intestinal Preparation
- Preoperative Medications- sedatives, Narcotics, Drying Agents, Nsg. Consideration
- Client Transport



Intraoperative Nursing Care

- Nurses and surgical technologies assist surgeons in the operating room.
2 basic categories of assistant are:
 - a. The sterile assistant (scrub nurse or OR technician. Function w/in
 - b. Circulating nurse – works outside the sterile field.



Postoperative Nursing Care

- The Post Anesthesia Care Unit or Post Anesthesia Recovery area – client is fully monitored until he or she is fully recovered from anesthesia. Located next to the operating room.
- Articles needed for care:
 - Breathing aids - Drugs
 - Circulatory Aids - Other Supplies



Postoperative Nursing Care

- Review Receiving the Client From the Post Anesthesia Care Unit (PACU).
- Immediate Post operative Complications
 - Hemorrhage – check site of surgery/dressing for bleeding
 - Shock
 - Hypoxia
 - Utilized the concept of ABC- airway, breathing, circulation



Postoperative Nursing Care

- Postoperative Discomfort
 - Pain
 - Thirst
 - Abdominal distention
 - Nausea
 - Urinary Retention
 - Constipation
 - Restlessness
 - Sleeplessness



Postoperative Nursing Care

- Prevention of Later Postoperative Complications
- Respiratory Complications- pneumonia, atelectasis – turning, coughing, deep breathing, chest percussion, incentive spirometer.
- Pain and discomfort – Splinting



Postoperative Nursing Care

- Circulatory Complications –
- Thrombophlebitis (venous stasis)- + Homan's sign indicates probable thrombophlebitis
- Embolism – pulmonary embolism (difficulty breathing, sharp chest pain, cough, cyanosis, rapid respirations and heart rate, and severe anxiety (TED hose, tx- thrombolytic agent)



Postoperative Nursing Care

- Other Complications:
- Infection – temp. elevation occurring 2-3 days after surgery, severe pain, redness or swelling around an incision. Assess incision every 4 hours.
- Tx – Administration of Antibiotics, increase fluids, rest, and adequate diet to build up resistance.
- Complication - MRSA



Postoperative Nursing Care

- Other Complications:
 - Dehiscence – splitting open or separation of the surgical incision.
 - Evisceration – incision opened and protrusion of abdominal organ.
 - “something gave” – pt usually verbalized.



Postoperative Nursing Care

- Additional Supportive Measures
 - Providing adequate nutrition
 - Irrigating Wounds
 - Changing Dressings
 - Removing Sutures and Staples
 - Providing IV therapy
 - The Venous Access Lock.